

730864

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

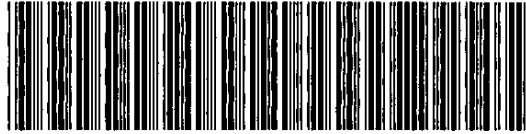
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JUN 12 AM 7:34

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Villa Biscaya Condominiums Phase II, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** 730864

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Carlos Montesino  
(Name of Contact Person)

Villa Biscaya Condominiums Phase II, Inc  
(Firm/Company)

4050 NW 135 ST 11-3  
(Address)

OPA LOCKA, FLORIDA 33054  
(City/State and Zip Code)

For further information concerning this matter, please call:

Carlos Montesino at ( 305 ) 789-7085  
(Name of Contact Person). (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Villa Biscaya Condominiums Phase II, Inc.
2. The principal office address: 4050 NW 135 ST 11-3  
Opa Locka Florida, 33054
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/02/1974 Document number: 730864
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Jorge Gabriel Zarate  
14411 Commerce Way Suite 240  
Miami Lakes, Florida 33016

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Carlos Montesino  
4050 NW 135 ST 11-3  
(P.O. Box NOT acceptable)  
Opa Locka Florida, 33054

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]  
(Signature of an officer or director)

Carlos Montesino (President)  
(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

[Signature]  
(Signature of Registered Agent)

6-9-2006  
(Date)

If signing on behalf of an entity:  
Villa Biscaya Condominiums Phase II, Inc.  
(Typed or Printed Name)

Sworn to and subscribed before me  
this 9th day of June 2006

Miriam Ventura

\*\*\* FILING FEE: \$35.00 \*\*\* Personally known to me

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

